



**Board of Commissioners of Cook County
Minutes of the Health & Hospitals Committee**

1:30 PM

Tuesday, December 17, 2024

**Cook County Building, Board Room,
118 North Clark Street, Chicago, Illinois**

ATTENDANCE

Present: Lowry, Anaya, Aguilar, Britton, Daley, Degnen, Gainer, Morita, K. Morrison, Quezada, Scott, Stamps and Trevor (13)

Absent: Miller, Moore and S. Morrison (3) excused

A motion was made by Vice Chairwoman Anaya, seconded by Commissioner Daley, to allow for remote participation in meeting. The motion carried by the following vote:

Ayes: Lowry, Anaya, Aguilar, Britton, Daley, Degnen, K. Morrison, Quezada, Scott, Stamps and Trevor (11)

Absent: Gainer, Miller, Moore, Morita and S. Morrison (5)

PUBLIC TESTIMONY

Chairman Lowry asked the Secretary to the Board to call upon the registered public speakers, in accordance with Cook County Code.

No public speakers.

25-0481

COMMITTEE MINUTES

Approval of the minutes from the meeting of 11/20/2024.

A motion was made by Vice Chairwoman Anaya, seconded by Commissioner Daley, to approve 25-0481. The motion carried by the following vote:

Ayes: Lowry, Anaya, Aguilar, Britton, Daley, Degnen, Gainer, Morita, K. Morrison, Quezada, Scott, Stamps and Trevor (13)

Absent: Miller, Moore and S. Morrison (3)

24-1437

Presented by: ERIK MIKAITIS, M.D., Chief Executive Officer, Cook County Health and Hospitals Systems

REPORT

Department: Cook County Department of Public Health (CCDPH)

Report Title: CCDPH Quarter 4 Report

Report Period: Q 4 2024

Summary: CCDPH-4th Quarter Report-Public Health Data Equity and Improvement Initiative

A motion was made by Vice Chairwoman Anaya, seconded by Commissioner Britton, to recommend for approval 24-1437. The motion carried by the following vote:

Ayes: Lowry, Anaya, Aguilar, Britton, Daley, Degnen, K. Morrison, Quezada, Scott, Stamps and Trevor (11)

Absent: Gainer, Miller, Moore, Morita and S. Morrison (5)

24-6451

Sponsored by: Monica Gordon, BILL LOWRY, FRANK J. AGUILAR, ALMA E. ANAYA, SCOTT R. BRITTON, JOHN P. DALEY, BRIDGET DEGNEN, BRIDGET GAINER, DONNA MILLER, STANLEY MOORE, JOSINA MORITA, KEVIN B. MORRISON, SEAN M. MORRISON, ANTHONY J. QUEZADA, MICHAEL SCOTT JR. and MAGGIE TREVOR, Cook County Board Of Commissioners

PROPOSED RESOLUTION

REQUESTING THAT THE STATE CONVENE A PANEL TO CREATE A PLAN FOR A LEVEL II TRAUMA CENTER IN THE SOUTHLAND

WHEREAS, The Illinois Department of Public Health (IDPH) was given the authority to designate and regulate all trauma centers through the Illinois Emergency Medical Services Act of 1980 (210 ILCS 50). Subsequently, through the Illinois Trauma Center Code (210 ILCS 50/3.90) the Department was given further authority by permitting any hospital that met the Department's trauma center standards to be so designated; and

WHEREAS, despite having one of the oldest statewide trauma systems in the country, Illinois still has several relative trauma deserts across the state. In urban settings such as Chicago's Southside, it has been argued that proximity to a trauma center in excess of 5 miles constitutes a trauma desert; and

WHEREAS, a trauma center designation means a hospital as a whole has the resources and staffing needed to provide comprehensive, specialized care for patients who suffer a traumatic injury from such causes as motor vehicle crashes, gun-shot wounds, burns and falls. The state requires Level 1 trauma care providers to have critical resources and specialists available 24/7. Emergency departments are the primary entry point for trauma patients, who must be stabilized in specialized trauma bays before being moved to other areas of a hospital for additional medical care. A Level II trauma center is very similar with the difference being the availability of subspecialists (in-house 24-hour vs. within 30 or 60 minutes) and the sophistication of diagnostic and monitoring equipment; and

WHEREAS, Southside and Westside Chicago communities tend to have higher numbers of firearm-related violence necessitating trauma services to treat penetrating injuries such as gun-shot wounds (GSW) and stab wounds; and

WHEREAS, Saint James Hospital in Olympia Fields, which serves the Southland, closed its Level 1 Trauma Center on July 1, 2008, after caring for acutely injured patients in the southern suburban area of Cook County since the inception of the Illinois Trauma System in 1988; and

WHEREAS, in 2011 the Cook County Public Health Department in collaboration with the University of Illinois at Chicago's School of Public Health, published an analysis titled Access to Trauma Care in Southern Cook County, An Assessment of the Impact of Closing St. James Olympia Fields Trauma Unit. In this analysis it established that "Research shows that patients suffering severe traumatic injuries who are under-triaged to facilities without trauma units suffer more adverse health outcomes and are more likely to die than those receiving care in level I or II trauma units. Furthermore, delay in treatment resulting from longer transport times has also been associated with greater in-hospital complications and mortality rates. Disparities in access to trauma care have important public health and social implications, as well as affect the functioning of the hospitals that receive an excess of patients because they cover too extensive an area"; and

WHEREAS, this same analysis found that "St. James Olympia Fields Hospital staff has reported to us that many ambulance services continue to bring acutely injured patients to St James Olympia Fields and Chicago Heights Hospitals. This is occurring because many of the ambulance services of towns in the most southern section of Cook County are reluctant to transport patients so far north to Advocate Christ, West to Silver Cross, or south to Kankakee Hospital. These long transport times often mean an ambulance unit is unavailable for other services for more than 2 hours"; and

WHEREAS, the same analysis found that there was a significant increase in the odds of a patient requiring mechanical ventilation after the closure of the St James Olympia Fields Hospital trauma unit

among patients transferred from the Olympia Fields catchment area, added to a significant increase in the total length of hospitalization; and

WHEREAS, in 2015, the State of Illinois published a Trauma Center Feasibility Study authored by LaMar Hasbrouck, MD, MPH, then Director of the Illinois Department of Public Health, seeking to analyze the need and feasibility of a trauma center in the Southland and emphasizing the need to treat gun-shot wounds in a geographically close trauma center. This study established that “Longer transport times often contribute to a higher mortality, while shorter transport times are associated with improved survival. A recent study examining the relationship of survival from a GSW and proximity to a trauma center in Chicago showed that for all victims shot more than 5 miles from a trauma center there was a 23% increased risk of dying. For Blacks, which represented 68 percent of the victims in the study, further analysis showed the difference in mortality for those shot within 5 miles compared to those shot outside of 5 miles translated into roughly 6.3 excess deaths per year for the community studied”; and

WHEREAS, intentional violence and alarming disparities in health, income, education, and health care access, heighten the negative impact of living within a Trauma center desert; and

WHEREAS, numerous public health advocate organizations, community leaders and medical representatives have joined the public outcry for a Trauma center in the Southland for almost 2 decades; and

WHEREAS, on May 2018, the University of Chicago Medicine launched their Trauma I center located in the Hyde Park Campus, and to this day does not plan on expanding services to include a Trauma I or II center at Ingalls Memorial.

NOW, THEREFORE, BE IT RESOLVED, that the Cook County Board of Commissioners does hereby request that the State, through the Illinois Department of Public Health convene a panel of trauma health experts, health representatives, Southland community leaders and select members of public health advocate organizations, including representatives of the Cook County Department of Public Health to analyze the requirements and cost and create a plan for effectuating either building a new Trauma II center or adding a Trauma II unit in an established hospital in the Southland to serve the need for trauma emergency treatment; and

BE IT FURTHER RESOLVED, that the members of the Cook County Board of Commissioners hereby direct the Cook County Clerk to transmit a copy of this resolution to IL Representative Emanuel Welch, Speaker of the House; IL Senator Don Harmon, President of the Senate and IL Governor JB Pritzker.

A motion was made by Vice Chairwoman Anaya, seconded by Commissioner Quezada, to recommend for approval 24-6451. The motion carried by the following vote:

Ayes: Lowry, Anaya, Aguilar, Britton, Daley, Degnen, Morita, K. Morrison, Quezada, Scott, Stamps and Trevor (12)

Absent: Gainer, Miller, Moore and S. Morrison (4)

ADJOURNMENT

A motion was made by Commissioner Trevor, seconded by Commissioner K. Morrison, to adjourn the meeting. The motion carried by the following vote:

Ayes: Lowry, Anaya, Aguilar, Britton, Daley, Degnen, Gainer, Morita, K. Morrison, Quezada, Scott, Stamps and Trevor (13)

Absent: Miller, Moore and S. Morrison (3)

Respectfully submitted,

Buil 4

Chairman

Lynne M. Turner

Secretary

A complete record of this meeting is available at <https://cook-county.legistar.com>.